A STUDY OF STRESS RELATED FACTORS AMONG WOMEN TEACHERS : IMPACTS ON MENTAL HEALTH AND HEALTH OUTCOMES

A

RESEARCH PROPOSAL

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Research Guide

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Introduction

Females reported higher feelings of anxiety, fear, crying, depression and blaming self as reactions to stressors than males (Anbumalar et.al.2017). Women face a number of burdens in everyday life as a result of social status and roles relative to men and these strains contribute to higher stress (Nolen-Hoeksema, 1990). Stress can lead to Academic decline, poor relationships with peers and family members and overall dissatisfaction with life. Women Teachers are a valuable human resource for our future and poor mental health in them leads to poor academic role , reduced quality of life, learning difficulties, work related performance and may negatively affect in the society (Abo , Salama&Allam 2017; Almeida, Lessa&Magalhaes 2004; Al-Modallal, Abuidhail, &Sowan. 2010). Mental health is the foundation for our all health and psychological well-being and effective workingfor an individual and for a society and that of women is important both for their own holistic health and for the well-being of their families , (Anbumalar et.al.2017). Women are more affected by psychological and mental disorders, the most common being stress, anxiety and depression (Babin& Boles 1998, Nurullah,2010). In Indian society, attitude towards women especially women and their role in family has remained the same, as even today taking care of the family and children is considered as their primary responsibility(Balaji,2014). The duties of work place and responsibilities both at domestic and workplace over stress a working woman, thereby leading to various psychological problems like role mental fatigue, stress, conflict, frustration anxiety, depression, irritation and other socio-emotional distress (Bhadoria, 2013). All of these problems can adversely affect the health outcomes and mental health of working women and more so in working women (Dhanabhakyam&Malarvizhi, 2014) . In addition, As women are bounded around with various cultural norms and values, working women are expected to make lot of adjustments (Dudhatra and Jogsan 2012) .Therefore, this in causes of sever work-related s stress among working women.Recently The World Health Organization estimated that Stress and depression will be the second largest contributor to disease burden by 2020, and one in every three women worldwide will be affected by common mental health problems including anxiety and depression(Essien& Stephen 2014, Hashmi, Khurshid, and Hassan,2007).Mental health is very essential aspect of women's health and is a resource to help women to deal with the depression, stresses and challenges

of everyday life (Hemanalini,2014),. A person who has good mental health is perform better in workplace and cope with the stress of everyday life, work productively, and contribute to the society (WHO, 2001).The findings of the study will not be only to minimize the severity and factors associated with stress of working women teachers but also enhance the health outcomes and mental health of the population.

Statement of the problem

Mental health refers to emotional and psychological well-being with good mental health helps to lead a relatively happy and healthy life. Mental health of working women can be affected significantly by some personal and some work-related factors. Mental health is one of the most important public health issues as it is a major contributor (14%) to the global burden of disease worldwide (Prince et.al.2007). It means the ability to respond to diverse experiences of life with flexibility and a sense of purpose. It can be described as a state of balancebetween an individual and his surrounding world, a state of harmony between oneself and others (Park, 2013).The educational institutes is recognized as a stressful environment that often exerts a negative effect on the mental healthand healthoutcomes, and psychological well-being of the teachers. The continuous evaluation process of students,exhausting work hours, striving for earning high grades for students, political pressure , implementation of government schemes, technical changes , pressure from educational management, lack of time management , domestic and family responsibilities etc. may source for stress on women teachers (Troyer 1990) .Other potential sources of stress for women teachers may include insecurity: enormous syllabus to be covered in a limited time period, sudden change in their style of studying, new concepts of education and lack of proper support. Furthmore , some studies on working women address the impact of major life events , every day "hassles" or daily events (e.g., conflict with partners, friends, family, struggling to meet family demands , being betrayed by friends or rejected socially) negatively affect health outcomes and mental Health more than major life events.A high prevalence of emotional disorders and poor mental health among women teachers wererereported at Indian and foreigners schools. When work-related stress is perceived negatively or becomes excessive, it can affect both mental Health and health outcomes.There are number of reports available and indicates that school‘s environment is not congenial and friendly for working teachers to enhance psychological and physical Health.Whereas, Health outcomes are changes in Health status that result from measures or specific Health care investments or interventions. The information concerning

the state of mental health and Health outcomes and particularly stress among women teachers has been more and more alarming. In the light of the above, the investigator becomes interested in determining the effects of stress on mental health and Health outcomes among working teachers.

Objectives of the study

Primary objectives

The primary objective of the study is to find and analyse the ways to tackle stress at work and creating a supportive workplace culture that would promote mental health and enables people to seek help safely, without risking adverse consequences in terms of occupational health management.

Specific objective

1. To assess the impact of work –related stress on mental health and health outcomes among working women teachers.

2. To understand the factors that contribute to poor mental health among working women teachersliving in Marathwada region.

3. The specific objective of the present study is to assess the mental healthstatus of working women teachers.

4. To assess the causes, incidence, and nature of stress among working women teachers, together with the strategies commonly used by them in dealing with excessive stress.

Research Questions

1. What are the other factors attributing to poor mental health of working women?.
2. What are the nature and causes of stress of working women?
3. How stress factors impact on mental health and health outcomes in working women ?
4. What is the relationship between stress between mental health and Health outcomes in working women ?

Delimitation of the study

1. The study will be delimited to working women teachers only
2. The study will be delimited to 500 working women teachers

Limitation of the study

Limitations of the study

There are a number of limitations restricting the generalize ability of this study are as.

1. Results of this study are limited by a relatively small preliminary survey of self-reported Academic Stress and Mental Health rather than a study of actual behaviour, which would be very difficult to achieve. As such, participants may have answered questions in a socially desirable manner to avoid the stigma associated with admitting personal inadequacies.
2. Another limitation is that the level of acculturation of the students was not examined. Because the measures were in English, many Thai and Indian students who have not mastered the English language that may be affect the result.

Definition and Explanation of Important technical Terms

Mental health

Mental health is a state of well-being in which an individual realizes his or her own abilities, can cope with the normal stresses of life, can work productively and is able to make a contribution to his or her community.

Stress

Stress is a feeling of emotional or physical tension. It can come from any event or thought that makes you feel frustrated, angry, or nervous. **Stress** is your body's reaction to a challenge or demand. In short bursts, **stress** can be positive, such as when it helps you avoid danger or meet a deadline.

Health outcomes

Health outcomes are changes in **health** that result from measures or specific **health** care investments or interventions. **Health outcomes** include. Preventing death after a heart attack through in-hospital care

Review of related literature

The researchers have gone through the available related literature, which are relevant to the present study and have been presented in coherent and systematic manner.

The study conducted by Sadiq and Ali (2014) foundthat working women had significantly more stress social dysfunction, anger and hostility. **Al-Modallal, Abuidhail and Sowan (2010)** reported that anxiety depression and stress experienced by working women he also reveled that causes of women's depression are imbedded in social and familial environment, rather than only their jobs. **One study conducted in China by Xu et.al. (2004)**indicated, that combined exposure to work and family- related stress was associated with mental health and health outcomes, increase in systolic blood pressure and sleep related problems **Kumar and Yadav (2010)** indicated that work-related task adversely impact on mental health of women in mid-adulthood whereas in early adulthood, time constraint has more negative impact on mental health of women. **The study conducted in** Sri Lanka, **by Kodagoda (2010)**on women in banking sector, indicates that , mothering and work responsibilities were major factors of work–family. **Yadav and Kumar (2015)** found that the bank employed women, as compared to the teachers, especially those in their early adulthood experience more household stress and poorer mental health. The one study conducted in **Hong Kong by Lo (2003)**in their study found that, female professionals with children had led to an exhausting lifestyle for almost all the female professionals with severe stress and poor mental health.**Hashmi et al., (2007).**indicates that working women have more problems in their life in terms of stress and mental health.**Mukhopadhyay (1997)**revealed that working women play a multidimensional role in family and work place. They experience a constant stressin both conditions and hence their mental health was adversely affected.**Kibria et al. (1990)**revealed that working mothers experienced high psychological distress due to their domesticresponsibilities. The works ofby women create more conflicting situation due to domestic and work place pressure **Sinha (1997)** found that working status of women had significant impacted onmental health and anxiety.**Leger (2004)**indicates that, working women experience depression and anxiety disorder and symptoms of depression and anxiety retard their success in workplace and domestic lives.**Chen and Lin (1992)** in their study found that working women reported higher levelsof anxiety and depression. **Kristina and**

Stephen (2015) reported that working women are facing severe stressdue to multiple roles, discrimination and stereotyping.**Kristina(2008)**indicates that work-related stress in women and its association with self-perceived health and sick leave among working women. On the other hand women associated with severe level of stress and absent from office. **Maryam Zarra-Nezhad et al.(2010)** stated that there exists negative relationship between occupational stress and family difficulties in working women.**Iwasaki et al., (2004)**revealed that womenexperience high levels of work–family stress as a result of societal expectations and thus bear the burden of greater levels of work–family stress.**Stephen and Kristina (2005)** observed, working women reported high stress due to multiple roles, lack of career progress, discrimination and stereotyping factors **Babin& Boles (1998)**work related stress affected working women job performance Women particularly feel stressed about trying to be a good organizational citizen.**Tomba and Rapheileng (2013)**found that women entrepreneurshave more amount of stressand Inability to spend enough time with families and friends, daycare and education for children are considered very stressful by female entrepreneurs.**Hemanalini (2014)** found out the causes of stress that affect women in the working atmosphere in the textile industry. Majority of women stated that they are experiencing stress because of job pressure and family responsibility.**The study conducted from** Nigeria by **Essien and Stephen (2014)** observed that annual leave and getting assistance from colleagues as the most widely used organizational and personal stress by women employees of commercial banks. **Dhanabakyam and Malarvizhi (2014)**revealed that negative relationship between stress and family difficulties in working women. The increase in work-family conflict leads to increase in work stress and vice versa in working women. The findings also shows that women in professional job positions with high job demand were more prone to experience work family conflict and work stress.**Abirami (2011)**indicates that family and work effectively creates stress among working women. The study also indicated that cause stress among working women are perception for stress under working conditions, and stress due to improper safety and security.**Rajasekhar and Sasikala (2013)**revealed that employed women face stress due to family responsibilities, job insecurity, workplace culture and high demand of job performance. **Dhanabhakyam and Anitha (2011)** observed that managing the daily home activities, looking after the family members and child care are identified as the sources of personal stress and developmental opportunity provided by the management, availability of transportation facility.**Balaji (2014)** concluded that work-family conflict and the stress undergone by women employees. He also found that women employees experience

work family conflict due to the number of hours worked in the office,size of the family and number of dependants of the family. These factors have a severe Consequences for the psychological distress and well-beingof working women.**Sussanna (2012)**revealed that high psychological demands; job strain and low job control are associated with increased stress and anxiety in working women.**Bhuvaneshwari (2013)**revealed that high stress in working women is caused due to working for long hours, various family and official commitments, and harassments at work place, thesefactors lead to stress in working women such as tried, headaches, blood pressure and obesity.

Stephen (2005)indicates work overload, criticism, negligent co-workers, lack of support from supervisors, and difficulties with physicians are the factors that cause stress among the nurses.**Chandra, Balaji, Kishore (2015)**revealed that most of the female employees are experiencing high level of stress comparedto men and un employees. **Ramanaiah and Subramanian (2008)** employees of Chennai city to know the level of stress they are experiencing. This study also found that, employees are under high level of stress and there exists a negative relationship between marital status and stress. As per the study, stress among women employeesis mainly due the over load of work and family responsibility.**Abo et.al (2017)**found that, abnormal general health status was statistically significant with participant age, residence, marital status, husband's education, family size, family income, number of school-going children, and government financial support. As regards work-related factors, personal relation with colleagues, and presence of conflict constituted significantly affected the mental health status of working women.

METHODOLOGY

Under this section explained the methodological details used to implement the study.

Survey site:

The survey site of the study will the delhi and Delhi NCR .

Sampling frame:

The sampling frame of the study will include different categories of working women teachers'i.e Teachers of Primary School, teachers of Middle schools and teachers of Higher education. The sample will also categorize into and aged group (25to 33, 34-42 and 43 to 50 years aged group)

Sampling method and Sample Size:

The method of sample will be purposive method of sample for women teachers from Delhi and Delhi NCR for specific purpose. Total 500 working women teachers from government Aided Primary schools, middle schools and Colleges will be selected as sample size of the study.Their aged range from 25-60.

Pilot Study

A pilot study will be conducted immediately after the approval of this research, prior to the commencement of the main study. The purpose of the pilot study is to test the feasibility and logistical aspects of the proposed study.

Research design:

This study will involve a descriptive study regarding impact of stress factors on mental health and health outcomes in working teachers in a non-experimental, descriptive survey design.

The inclusion and exclusion criteria for participants were as follows:

The inclusion criteria are:

1. The participant was agreeing to participate in the study
2. The participants, working women teachers in their aged range was 25 to 60 years.

The exclusion criteria are:

1. The participants advised not to participate if under any serious psychological disorders.
2. Inability to obtain the questionnaire of the respondent.

Tools of the study

1. **Consent form:**

   This form will be formatted in Hindi., and English language & give to all participants of this study. The written consent will be taken from each subject before screening procedure.

2. **Socio-demographic information sheet :**

The demographic information about, health history, currentdisease,age, weight, drug use, risk factors for domestic violence, type of family and no. of child of the participated will be obtained before seeking responses.

3. **Hindi adaptation of General Health Questionnaire (GHQ)**

   The Hindi adaptation of GHQ-28 will be usedfor measure mental health of the sample. The GHQ-28 developed by Goldberg and Hillier. This questionnaire Detects symptoms of non-psychotic psychological disturbances. It consists of 28 items divided into 4 sub-scales such as anxiety, depression, somatic symptoms and social dysfunction each having 7 items. GHQ-28 is a four point scale, each item recorded from 1 to 4. Thus a subject can get a minimum total score of 7 and maximum 28 on each subscale.

4. **Psycho-social stress scale**

   In assessing the stress factors TheICMR's psycho-social stress scale will be used to measure stress factors of working women teachers. This scale is to assess the extent of individual's feelings of the basic components of psychological stress factors (such as pressure, tension, anxiety, conflict, frustration etc.) resulted from perceived stress situations (such as adversities, hardships, threats, afflictions, failures, constraints, excessive demands, conflicting role etc) in various spheres of their social life. The scale consisted of 40 items. This scale consisting of the routine or chronic situations of psychological stress, a short measure of the psycho-social stress arising from 'crucial life events' taken place in respondents life in last one year.

5. **Health outcomes**

   In assessing the Health outcomes, the Medical Outcome Study: Short-form 36 (MOS SF-36) that was developed by Ware, Snow, Kosinski, Gandek (1993) will be used. It assesses eight health concepts including: Perceived general health (5 items); Physical functioning (10 items); Social functioning (2 items);Bodily pain (2 items); Vitality (4 items); Physical role (4 items); Emotional role (3 items); and Mental health (5 items).

   The all tools of the study will be translated into Marathi, Hindi and Marathi languages by a skilful translator and the researchers. The validity and reliability will be found out in Hindi and Marathi version of study tools.

<u>Techniques for Collection of Data</u>:

The survey will be undertaken across aided educational institutes of Delhi and Delhi NCR region. The Information will be collected through aninstitution to institution survey or as per convenient of investigators. Detailed information was collected from a responsible respondent in each institution. The investigator will appoint the skilful field investigator from each selected Area. Two copies of consent form will be distributed by the field investigator in the presence of investigator to the participants and collected from them after they have responded.

Statistical technique:

Percentage, one way analysis of variance (scheffe post hoc test, LSD test if ANOVA will found out significant), Chi-square and Regression analysis will be used and a p-value of <0.05 consider statistically significant throughout the study.

Rationale

As per the WHO, Indians are reported to be among the worlds most depressed. The burden of depression is 50% higher for females than males (Jané-Llopis et al. 2011). Apart from the problems of lack of diagnosis and treatment of mental health problems among Indian working women teachers , other problems have been found to be insufficient number of mental health professionals, lack of awareness, position of women, multiple roles, increased levels of stress, and domestic problem (Bohra et al. 2015). Despite such studies, there is still a paucity of research on mental health, stress factors and Health outcomes in working women teachers in India. Previous studies conducted on mental health from India are very few and cross sectional that range over small sample of population (Yerramilli 2012). Therefore, studying mental health, stress and Health outcomes issues of working teachers in itself makes an important contribution to this area of research.

In addition to this, to the best of my knowledge, there are no studies on mental health, stress and Health outcomes in working women around this topic in India.

Even though there are several research reports indicating the effects of stress in women's mental health but there are limited research studies exploring effect of stress factors on

mental health and health outcomes in working teachers. Even though there are several research reports indicating negative impact of stress on health outcomes and other psychological factors but there are limited research studies exploring the severity and nature of stress factors and its effects of mental health and health outcomes of working teachers. This study also will be demonstrated the management of stress, increased universal health and psychological well-being and reduced the frequency of stress factors, and generally improved the mental health and health outcomes.

Category of respondents

The category of respondent will be divided into three categories i.e Primary school level 500 working women teachers , 500 High school working women teachers and 500 higher education (Colleges and University Level) teachers

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